

| | | | | |
|-----------------------------|-------------------------|--------------------------------|--|-----------------------------------|
| SERIAL NUMBER 09/333,383 | FILING DATE 06/15/99 | CLASS 324 709 | GROUP ART UNIT 2858 255 | ATTORNEY DOCKET NO. 5181-29600 |
|-----------------------------|-------------------------|--------------------------------|--|-----------------------------------|

APPLICANT BOMAN IRANI, STITTSVILLE, CANADA.

****CONTINUING DOMESTIC DATA*******
 VERIFIED
Noel KD

****371 (NAT'L STAGE) DATA*******
 VERIFIED
Noel KD

****FOREIGN APPLICATIONS*******
 VERIFIED
Noel KD

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 07/15/99

| | | | | | |
|---|--|-------------------------|----------------------|-------------------|-------------------------|
| Foreign Priority claimed 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY CAX | SHEETS DRAWING 15 | TOTAL CLAIMS 4 | INDEPENDENT CLAIMS 4 |
| Verified and Acknowledged | <u>ICD</u> Examiner's Initials <u>ICD</u> Initials | | | | |

ADDRESS B NOEL KIVLIN
 CONLEY ROSE & TAYON PC
 P O BOX 398
 AUSTIN TX 78767

TITLE SYSTEM AND METHOD FOR PUSHING PERSONALIZED CONTENT TO SMALL FOOTPRINT DEVICES

| | | |
|----------------------------------|---|---|
| FILING FEE RECEIVED \$968 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|----------------------------------|---|---|